

SOCIAL SECURITY CLAIMS QUESTIONNAIRE

The U.S. Social Security Administration pays the following types of benefits:

- Retirement and disability benefits to the worker/number holder.
- Spouse's and children's benefits to dependents of the worker.
- Widow's or widower's, children's, parent's benefits and lump sum death payment to survivors of the worker.

To enable the Social Security Administration in Manila to contact you about your inquiry, please answer all applicable items below.

Section A

NAME OF THE WORKER: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

IF DECEASED, DATE OF DEATH _____

FATHER'S NAME: _____

MOTHER'S FULL MAIDEN NAME: _____

Section B

IF WORKER HAS A SPOUSE COMPLETE THIS SEGMENT. IF NONE, PROCEED TO SECTION C.

NAME OF SPOUSE (show maiden name): _____

SOCIAL SECURITY NUMBER, if any: _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

Section C

IF WORKER HAS MINOR (18 years old and below), DISABLED CHILDREN, OR CHILDREN OVER 18 BUT UNDER 19 BUT IN FULL TIME ELEMENTARY OR HIGH SCHOOL, COMPLETE THIS SEGMENT. IF NONE PROCEED TO THE SIGNATURE BLOCK.

Names of Children	Date/Place of Birth	Social Security Number	Citizenship

Our office is available for interviews between 10:00 AM and 1:00 PM (local Sydney time), Tuesdays through Thursdays. Please check below the time and day convenient to you. If you prefer any specific date, please indicate under the day column. Thirty (30) minutes will be allotted for this telephone appointment.

	A	N	Y
T I M E	TUESDAY	WEDNESDAY	THURSDAY
10:00 – 10:30			
10:30 – 11:00			
11:00 – 11:30			
11:30 – 12:00			
12:00 – 12:30			
12:30 – 1:00			

We will call you to confirm your appointment and advise you of the information and evidence we will need in support of your claim.

Name of Person Inquiring: _____

Signature over printed name of applicant: _____ Date: _____

Residence Address: _____

E-mail address: _____

Telephone Number: _____ Fax Number: _____